

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>W</i>	<i>68904</i>	<i>5/31/00</i>
O.I.P.E. CLASSIFIER	<i>L</i>	<i>52</i>	<i>6/7/00</i>
FORMALITY REVIEW	<i>M A</i>	<i>547</i>	<i>7-18-00</i>
RESPONSE FORMALITY REVIEW	<i>(S)</i>	<i>32130</i>	<i>10-20-00</i>

# INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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